Case 1:04-cr-10197-MLW Document 2 Filed 07/13/2004 A 20 ALLOES IMENT OF AND AUTHORITE TOTAL COURT ALLOUSED COURSED 1. CIR/DIST/DIV. CODE 2. PERSON REPRESENTED VOUCHER NUMBER Alvarado, Juan Rivera MAX 3, MAG. DKT./DEF. NUMBER 4. DIST. DKT./DEF. NUMBER 5. APPEALS DKT./DEF. NUMBER 6. OTHER DKT. NUMBER 1:04-010197-001 7. IN CASE/MATTER OF (Case Name) 8. PAYMENT CATEGORY 9. TYPE PERSON REPRESENTED 10. REPRESENTATION TYPE (See Instructions) Criminal Case Felony Adult Defendant U.S. v. Alvarado 11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) If more than one offense, list (up to five) major offenses charged, according to severity of offense.

1) 18 1028A.F.-- FRAUD WITH IDENTIFICATION DOCUMENTS 12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix) AND MAILING ADDRESS 13. COURT ORDER O Appointing Counsel
F Subs For Federal Defender □ C Co-Counsel
 □ R Subs For Retained Attorney
 □ Y Standby Counsel Х F Subs For Federal Defender
P Subs For Panel Attorney RANKIN, CHARLES W. ONE COMMERCIAL WHARF NORTH Prior Attorney's Name: 2ND FLOOR Appointment Date: BOSTON MA 02110 Because the above-named person represented has testified under oath or has otherwise satisfied this court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel, and because the interests of justice so require, the attoracy whose name appears in tem 12 is appointed to represent this person in this case, Telephone Number: (617) 720-0011 14. NAME AND MAILING ADDRESS OF LAW FIRM (only provide per instructions) ░ Oth RANKIN AND SULTAN Signature of Fresiding Judicial Officer of By Order of the Court RANKIN AND SULTAN ONE COMMERCIAL WHARF 01/13/2004 Date of Order BOSTON MA 02110 Nunc Pro Tune Date Repayment or partial repayment ordered from the person represented for this service at time of appointment. \square YES \square NO TOTAL AMOUNT CLAIMED MATH/TECH ADJUSTED HOURS MATH/TECH ADJUSTED AMOUNT HOURS CLAIMED ADDITIONAL REVIEW CATEGORIES (Attach itemization of services with dates) 15. a. Arraignment and/or Plea b. Bail and Detention Hearings c. Motion Hearings d. Trial e. Sentencing Hearings C f. Revocation Hearings g. Appeals Court h. Other (Specify on additional sheets) (Rate per hour = \$ TOTALS: a. Interviews and Conferences b. Obtaining and reviewing records c. Legal research and brief writing d. Travel time Court e. Investigative and Other work (Specify on additional sheets) (Rate per hour = \$ TOTALS: 17. Travel Expenses (lodging, parking, meals, mileage, etc.) 18. Other Expenses (other than expert, transcripts, etc.) 19. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE 20. APPOINTMENT TERMINATION DATE IF OTHER THAN CASE COMPLETION 21. CASE DISPOSITION Have you previously applied to the court for compensation and/or remimbursement for this case?

| YES | NO | If yes, were you paid? | YES | If yes, were you paid? | YES | If yes, were you paid? | YES | If yes, give details on additional sheets. | YES | If yes, give details on additional sheets. | I swear or affirm the truth or correctness of the characteristics. 22. CLAIM STATUS

	I swear or affirm the truth or correctness of the above statements.				
	Signature of Attorney:			Date:	
23.	IN COURT COMP.	24. OUT OF COURT COMP.	25. TRAVEL EXPENSES	26. OTHER EXPENSES	27. TOTAL AMT. APPR / CERT
28. SIGNATURE OF THE PRESIDING JUDICIAL OFFICER				DATE	28a. JUDGE / MAG, JUDGE CODE
29.	IN COURT COMP.	30. OUT OF COURT COMP.	31. TRAVEL EXPENSES	32. OTHER EXPENSES	33. TOTAL AMT. APPROVED
34.	SIGNATURE OF CHIE approved in excess of the st	F JUDGE, COURT OF APPEALS (Catutory threshold amount.	DATE	34a. JUDGE CODE	